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DECLARATION FOR		First Named I			, Jr., et al.						
DESIGN PATENT APPL	-		OMPLETE								
(37 CFR 1.		Application No	$\overline{}$		•						
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Submitted OR Su	eclaration bmitted after Initial	Group Art Unit									
Filing (3)	ling (surcharge 7 CFR 1.16 (e)) quired)	Examiner Nan	Examiner Name			ノ					
As a below named Inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) or fixe subject matter which is claimed and for which a patient is sought on the invention entitled: ISOLATION OF MICROMONORA CAMBONAC AMBONA CHAR AFREACH AMBIT INTERESTS AND USE OF THE AMBOUND OF THE AMBONACH AMBONACH AND AMBONACH AMBONA											
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claim		fied Copy Attached?						
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Additional foreign application nu											
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160/204,670	05/17/2000		nu su	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.							
		[Page 1 of 2]				_					
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DECLARATION — Utility or Design Patent Application

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formation which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.															
					Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)							
Additional U.S. or PCT international application numbers are listed on e As a named inventor, I hereby appoint the following registered practitioner(s) and Trademark Office connected therewith: OR OR OR						ioner(s) t 24: ner(s) na	supplemental priority data sheet PTO/SE					ro/sb/o	02B etteched hereto.		
Additional r	egistered	practitioner(s) n	amed o	n suppl	lomental	Reg	istered F	racti	tioner I	nforr	nation she	et PTO/	SB/02C	attached here	to.
Additional registered practitioner[n] named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto. Direct all correspondence to: Customer Number or Bar Code Label 24265 OR □ Correspondence address below or Bar Code Label															
Name	Im	Immac J. Thampoe Reg. No. 36322													
Address															
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City								St	ate			ZIP			
Country				Telephone (908)			(908)	298-5061			Fax (908) 298-5388			3	
herdy declare that all statements made herein of my own knowledge are true and that still statements made on information and belief are believed to be true, and further that these statements were made with the broaded part of my owner that the statements and the like on made are application or any paint statement from the control of the statements made to be sometic are application or any paint statement from the control of the statements may popuratize the validity of the application or any paint statement made on the control of the contro															
Name of Sole or First Inventor:										ntor					
Given Name (first and middle [if any])							Family Name or Sumame								
Thomas	J.	Hosted, Jr.													
Inventor's Signature														Date	
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	Linvento	rs are being n			1	nnl	ementa	Add	litional	lnv	entor(s)	sheet(s) PTO	/SB/02A attac	hed hereto

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

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Ann C. Horan											
Inventor's Signature							Date				
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Inventor's Signature								Dat	ю.		
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Name of Addition	nai Joint Inventor, if an	y:			A petiti	on has been file	d for t	his unsign	ed inv	entor	
Given Na	me (first and middle [if any])				Family Na	me or	Surname			
Inventor's Signature								Da	te		
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